

**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Patent Number	6,909,691
Issue Date	June 21, 2005
First Named Inventor	Pawan Goyal
Application Serial No.	09/633,575
Filing Date	August 7, 2000
Attorney Docket Number	21816-04466

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above identified patent application. The client has been duly notified of this request for withdrawal and provided with all papers and property to which the client is entitled.

The reasons for this request are:

The client knowingly and freely assents to termination of the employment.

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

Firm or Individual Name	Perkins Coie LLP				
Address	1899 Wynkoop Street, Suite 700				
Address					
City	Denver	State	CO	Zip	80202-1043
Country	US				
Telephone	303-291-2300	Fax	303-291-2400		

- ☒ This request is made on behalf of myself and
- ☐ all the attorneys/agents of record,
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 00758
- on whose behalf I have signed this request and on whose behalf I am authorized to sign.

Name	Sabra-Anne R. Truesdale, Reg. No. 55,687
Signature	/Sabra-Anne R. Truesdale/
Date	August 3, 2007

*NOTE: Withdrawal is effective when approved rather than when received.  
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.*